Notice of Exempt Offering of Securities

SEC1972 (09/08)

U.S. Securities and Exchange Commission

Washington, DC 20549

Intentional misstatements or omissions of fact constitute federal criminal violations. See 18 U.S.C. 1001.

(See instructions beginning on page 5)

OMB APPROVAL OMB Number: 3235-0076

Expires: March 31, 2009

Estimated average burden hours per response: 4.00

Item 1. Issuer's Identity			
Name of Issuer	Previous Name(s)	None None	Entity Type (Select one)
LaSalle Futures Fund II, LP	Previous Name(s)	None	Corporation
L Jurisdiction of Incorporation/Organization			Limited Partnership
DE]	PROCESSEL	Limited Liability Company
DL		o # 2000	General Partnership
Year of Incorporation/Organization		MAR 27 2009	Business Trust
(Select one)		HARROMANICANIDEITE	Other (Specify)
Over Five Years Ago Within Last Five Years (specify year)	2004	Be Formed	1.8.00
(If more than one issues is filing this notice she	ck this box and identify as	dditional iccurr(s) by attack	aing Itams 1 and 3 Continuation Regards)
(If more than one issuer is filing this notice, che			ing items I and 2 Continuation Page(s).)
Item 2. Principal Place of Business and Street Address 1		n Street Address 2	
141 West Jackson Boulevard		Suite 3844	
City	State/Province/Country 2	ZIP/Postal Code	Phone No.
Chicago	IL e	60604	(312) 986-1902
Item 3. Related Persons			
			ACLU AL
Last Name	First Name		Middle Name
LaSalle Asset Management, L.L.C.			
Street Address 1		Street Address 2	Man SEC
141 West Jackson Boulevard	9	Suite 3844	Section Section
City S	tate/Province/Country Z	ZIP/Postal Code	20037912
Chicago	_	50604	MAR 13 2008
Relationship(s): X Executive Officer	Director Promoter		
			Washington, DC
Clarification of Response (if Necessary)	eral Partner		103
(Identify	additional related persons b	y checking this box 🔀 and	d attaching Item 3 Continuation Page(s).
Item 4. Industry Group (Select or	ne)		
 Agriculture 	Business Se	ervices	Construction
Banking and Financial Services	Energy	I lailtai	REITS & Finance
Commercial Banking Insurance	Electric Energy (Otilities Conservation	Residential
Investing	Coal Mir		Other Real Estate
Investment Banking	<u> </u>	mental Services	 Retailing
Pooled Investment Fund	Oil & Ga		Restaurants
If selecting this industry group, also select			Technology
type below and answer the question belo			Computers
○ Hedge Fund	Biotechi		Telecommunications
Private Equity Fund	Health Ir	nsurance	Other Technology
Venture Capital Fund	Hospital	s & Physcians	Travel
Other Investment Fund	Pharmac	:euticals	Airlines & Airports
Is the issuer registered as an investm company under the Investment Con	() Other ne	ealth Care	
Act of 1940? Yes No	Manufactu	ring	
Other Banking & Financial Services	Real Estate		
9	Comme	rcial	

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Item 5. Issuer Size (Select one)	
Revenue Range (for issuer not specifying "hedge" or "other investment" fund in Item 4 above)	specifying "hedge" or "other investment" fund in
No Revenues	OR No Aggregate Net Asset Value
\$1-\$1,000,000	\$1 - \$5,000,000
\$1,000,001 - \$5,000,000	\$5,000,001 - \$25,000,000
\$5,000,001 - \$25,000,000	\$25,000,001 - \$50,000,000
\$25,000,001 - \$100,000,000	\$50,000,001 - \$100,000,000
	Over \$100,000,000
Over \$100,000,000	
Decline to Disclose	
Not Applicable	Not Applicable
Item 6. Federal Exemptions and Exclusions Cla	
	Investment Company Act Section 3(c)
Rule 504(b)(1) (not (i), (ii) or (iii))	Section 3(c)(1) Section 3(c)(9)
Rule 504(b)(1)(i)	Section 3(c)(2) Section 3(c)(10)
Rule 504(b)(1)(ii)	Section 3(c)(3) Section 3(c)(11)
Rule 504(b)(1)(iii)	Section 3(c)(4) Section 3(c)(12)
Rule 505	Section 3(c)(5) Section 3(c)(13)
☐ Rule 506	Section 3(c)(6) Section 3(c)(14)
Securities Act Section 4(6)	Section 3(c)(7)
Itam 7 Type of Filing	
Item 7. Type of Filing	
New Notice OR • Amendme	ent
Date of First Sale in this Offering: 10/1/04	OR First Sale Yet to Occur
Item 8. Duration of Offering	
Does the issuer intend this offering to last more tha	an one year? X Yes No
Item 9. Type(s) of Securities Offered (Select	ct all that apply)
☐ Equity	▼ Pooled Investment Fund Interests
☐ Debt	Tenant-in-Common Securities
Out Washington Other States Assessing	Mineral Property Securities
Option, Warrant or Other Right to Acquire Another Security	Other (Describe)
Security to be Acquired Upon Exercise of Option, Warrant or Other Right to Acquire Security	
Item 10. Business Combination Transaction	
Is this offering being made in connection with a busi transaction, such as a merger, acquisition or exchange off	
Clarification of Response (if Necessary)	

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Item 11. Minimum Investment				
Minimum investment accepted from any o	outside investor \$	50,000		
Item 12. Sales Compensation				
Recipient		Recipient CRD Number		
				☐ No CRD Number
(Associated) Broker or Dealer No	one	(Associated) Broker or Dea	aler CRD Nu	mber
ALTEGRIS INVESTMENTS, INC.		8258		No CRD Number
Street Address 1		Street Address 2		
1200 PROSPECT STREET		SUITE 400		
City	State/Province	/Country ZIP/Postal Cod	de	
LA JOLLA	CA	92037		
AL AK AZ AR IL IN IA KS MT NE NV NH RI SC SD TN (Identify additional person(s))		CT DE DC ME MD MA NY NC ND VT VA WA ion by checking this box	FL MI OH WV and attach	GA HI ID MN MS MO OK OR PA WI WY PR sing Item 12 Continuation Page(s).)
\$			7	
(a) Total Offering Amount			OR	✓ Indefinite
(b) Total Amount Sold \$	29,436,988			
(c) Total Remaining to be Sold (Subtract (a) from (b)) Clarification of Response (if Necessary)			OR	X Indefinite
Mars 44 Investors				
Item 14. Investors			1:6	
Check this box X if securities in the offering number of such non-accredited investors we	ng have been or may be who already have investe	ed in the offering:	quality as ac	created investors, and enter the
Enter the total number of investors who a	lready have invested in t	he offering: 156		
Item 15. Sales Commissions and	Finders' Fees Ex	penses		
Provide separately the amounts of sales co check the box next to the amount.	mmissions and finders' f	fees expenses, if any. If an a	mount is no	ot known, provide an estimate and
		Sales Commissions \$ 0		Estimate
Clarification of Response (if Necessary)		Finders' Fees \$ 0		Estimate
Broker-dealer receives a portion of the fee.	general partner's ma	nagement		

number.

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Item 16. Use of Proceeds					
Provide the amount of the gross proceeds of the offering that has been or is used for payments to any of the persons required to be named as exe directors or promoters in response to Item 3 above. If the amount is unkno estimate and check the box next to the amount.	ecutive officers,	Estimate			
Clarification of Response (if Necessary)					
Signature and Submission					
Please verify the information you have entered and review the Te	rms of Submission below before signing and su	bmitting this notice.			
Terms of Submission. In Submitting this notice, each ide	ntified issuer is:				
Irrevocably appointing each of the Secretary of the SEC the State in which the issuer maintains its principal place of busing process, and agreeing that these persons may accept service on such service may be made by registered or certified mail, in any against the issuer in any place subject to the jurisdiction of the lactivity in connection with the offering of securities that is the seprovisions of: (i) the Securities Act of 1933, the Securities Exchan Company Act of 1940, or the Investment Advisers Act of 1940, of State in which the issuer maintains its principal place of business. Certifying that, if the issuer is claiming a Rule 505 exemption in the securities and the reasons stated in Rule 505(b)(2)(iii).	iness and any State in which this notice is filed, a its behalf, of any notice, process or pleading, ar Federal or state action, administrative proceedi Jnited States, if the action, proceeding or arbitra ubject of this notice, and (b) is founded, directly age Act of 1934, the Trust Indenture Act of 1939, or any rule or regulation under any of these status s or any State in which this notice is filed.	is its agents for service of ad further agreeing that ing, or arbitration brought ation (a) arises out of any or indirectly, upon the the Investment ites; or (ii) the laws of the			
* This undertaking does not affect any limits Section 102(a) of the Nation 110 Stat. 3416 (Oct. 11, 1996)] imposes on the ability of States to require "covered securities" for purposes of NSMIA, whether in all instances or or routinely require offering materials under this undertaking or otherwise so under NSMIA's preservation of their anti-fraud authority. Each identified issuer has read this notice, knows the contents to undersigned duly authorized person. (Check this box and a in Item 1 above but not represented by signer below.)	e information. As a result, if the securities that are the due to the nature of the offering that is the subject of e and can require offering materials only to the extent	subject of this Form D are this Form D, States cannot NSMIA permits them to do signed on its behalf by the			
	N				
Issuer(s) LaSalle Futures Fund II, LP	Name of Signer David R. Allen				
Signature	Title				
1/-/->//	Attorney of Issuer	Date			
Number of continuation pages attached: 1		3/9/09			

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB

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Item 3 Continuation Page

Item 3. Related Persons (Continued) First Name Middle Name Last Name David Fox Street Address 2 Street Address 1 **Suite 3844** 141 West Jackson Boulevard State/Province/Country ZIP/Postal Code City IL 60604 Chicago Relationship(s): Clarification of Response (if Necessary) Officer of the general partner Middle Name Last Name First Name Paul Kim Street Address 2 Street Address 1 Suite 3844 141 West Jackson Boulevard State/Province/Country ZIP/Postal Code City IL 60604 Chicago X Executive Officer Director Promoter Relationship(s): Clarification of Response (if Necessary) Officer of the general partner Middle Name Last Name First Name Street Address 2 Street Address 1 State/Province/Country ZIP/Postal Code City Executive Officer Director Promoter Relationship(s): Clarification of Response (if Necessary) Middle Name First Name Last Name Street Address 2 Street Address 1 State/Province/Country ZIP/Postal Code City Executive Officer Director Promoter Relationship(s): Clarification of Response (if Necessary)



Form D 9

(Copy and use additional copies of this page as necessary.)